

1 Department of Health

2

3 Adopted Permanent Rules Relating to Health; Disease and Syndrome
4 Reporting

5

6 Rules as Adopted

7 4605.7000 DEFINITIONS.

8 Subpart 1. **Case.** "Case" means a person infected with a
9 particular infectious agent or having a particular disease
10 diagnosed by a physician.

11 Subp. 2. **Carrier.** "Carrier" means a person identified as
12 harboring a specific infectious agent and who serves as a
13 potential source of infection.

14 [For text of subp 3, see M.R.]

15 Subp. 4. **Infection control practitioner.** "Infection
16 control practitioner" means any person designated by a hospital,
17 nursing home, medical clinic, or other health care facility as
18 having responsibility for prevention, detection, reporting, and
19 control of infections within the facility.

20 [For text of subps 5 and 6, see M.R.]

21 Subp. 7. **Medical laboratory.** "Medical laboratory" means
22 any facility that receives, forwards, or analyzes specimens of
23 original material from the human body, or referred cultures of
24 specimens obtained from the human body, and reports the results
25 to physicians who use the data for purposes of patient care.

26 [For text of subps 8 to 10, see M.R.]

27 Subp. 11. **Public health hazard.** "Public health hazard"
28 means the presence of an infectious agent or condition in the
29 environment which endangers the health of a specified population.

30 4605.7010 PURPOSE.

31 This chapter establishes a process and assigns
32 responsibility for reporting, investigating, and controlling
33 disease.

34 4605.7020 APPLICABILITY.

1 This chapter applies to cases, suspected cases, and deaths
2 from communicable diseases and syndromes, reporting of disease,
3 and disease control.

4 4605.7030 PERSONS REQUIRED TO REPORT DISEASE.

5 [For text of subpart 1, see M.R.]

6 Subp. 2. **Health care facilities.** Hospitals, nursing
7 homes, medical clinics, or other health care facilities must
8 designate that all individual physicians report as specified in
9 subpart 1; or the health care facility must designate an
10 infection control practitioner or other person as responsible to
11 report to the commissioner, within one working day of knowledge
12 of a case, suspected case, carrier, or death from any of the
13 diseases and syndromes in part 4605.7040, and the information
14 specified in part 4605.7090.

15 Subp. 3. **Medical laboratories.** All medical laboratories
16 must provide to the commissioner, within one working day of
17 completion, the results of microbiologic cultures, examinations,
18 immunologic assays for the presence of antigens and antibodies,
19 and any other laboratory tests, which are indicative of the
20 presence of any of the diseases in part 4605.7040 and the
21 information specified in part 4605.7040 as is known.

22 The medical laboratory must forward to the Minnesota
23 Department of Health, public health laboratory all isolates
24 specified in part 4605.7040.

25 [For text of subs 4 and 5, see M.R.]

26 Subp. 6. **Others.** Unless previously reported, it shall be
27 the duty of every other licensed health care provider who
28 provides care to any patient who has or is suspected of having
29 any of the diseases listed in part 4605.7040 to report within
30 one working day to the commissioner as much of the information
31 outlined in part 4605.7090 as is known.

32 4605.7040 DISEASE AND REPORTS; ISOLATE SUBMISSIONS.

33 Cases, suspected cases, carriers, and deaths due to the
34 following diseases and infectious agents shall be reported. The
35 diseases followed by an asterisk shall be reported immediately

- 1 by telephone to the commissioner.
- 2 A. Amebiasis (*Entamoeba histolytica*)
- 3 B. Anthrax* (*Bacillus anthracis*)
- 4 C. Babesiosis (*Babesia* sp.)
- 5 D. Blastomycosis (*Blastomyces dermatitidis*)
- 6 E. Botulism* (*Clostridium botulinum*)
- 7 F. Brucellosis (*Brucella* sp.)
- 8 G. Campylobacteriosis (*Campylobacter* sp.) Submit
- 9 isolates to the Minnesota Department of Health, Public Health
- 10 Laboratory
- 11 H. Cat Scratch disease (infection caused by Bartonella
- 12 species)
- 13 I. Chancroid* (*Haemophilus ducreyi*)
- 14 J. *Chlamydia trachomatis* infections
- 15 K. Cholera* (*Vibrio cholerae*) Submit isolates to the
- 16 Minnesota Department of Health, Public Health Laboratory
- 17 L. Cryptosporidiosis (*Cryptosporidium parvum*)
- 18 M. Dengue virus infection
- 19 N. Diphtheria (*Corynebacterium diphtheriae*) Submit
- 20 isolates to the Minnesota Department of Health, Public Health
- 21 Laboratory
- 22 O. *Diphyllobothrium latum* infection
- 23 P. Ehrlichiosis (*Ehrlichia* sp.)
- 24 Q. Encephalitis (caused by viral agents)
- 25 R. Enteric escherichia coli infection (E. coli
- 26 0157:H7, other enterohemorrhagic E. coli, enteropathogenic E.
- 27 coli, enteroinvasive E. coli) Submit isolates to the Minnesota
- 28 Department of Health, Public Health Laboratory
- 29 S. Giardiasis (*Giardia lamblia*)
- 30 T. Gonorrhea (*Neisseria gonorrhoea* infections)
- 31 U. *Haemophilus influenzae* disease (all invasive
- 32 disease) Submit isolates to the Minnesota Department of Health,
- 33 Public Health Laboratory
- 34 V. Hantavirus infection
- 35 W. Hemolytic uremic syndrome
- 36 X. Hepatitis (all primary viral types including A, B,

- 1 C, D, and E)
- 2 Y. Histoplasmosis (*Histoplasma capsulatum*)
- 3 Z. Human Immunodeficiency Virus (HIV) infection,
4 including Acquired Immunodeficiency Syndrome (AIDS)
- 5 AA. Influenza (unusual case incidence or laboratory
6 confirmed cases)
- 7 BB. Kawasaki disease
- 8 CC. Legionellosis (*Legionella* sp.)
- 9 DD. Leprosy (*Mycobacterium leprae*)
- 10 EE. Leptospirosis (*Leptospira interrogans*)
- 11 FF. Listeriosis (*Listeria monocytogenes*) Submit
12 isolates to the Minnesota Department of Health, Public Health
13 Laboratory
- 14 GG. Lyme Disease (*Borellia burgdorferi*)
- 15 HH. Malaria (*Plasmodium species*)
- 16 II. Measles (Rubeola)*
- 17 JJ. Meningitis (caused by *Haemophilus influenzae*,
18 *Niesseria meningiditis*, or *streptococcus pneumoniae*, viral
19 agents) Submit bacterial isolates to the Minnesota Department of
20 Health, Public Health Laboratory
- 21 KK. Meningococemia (*Neisseria meningiditis*) Submit
22 isolates to the Minnesota Department of Health, Public Health
23 Laboratory
- 24 LL. Mumps*
- 25 MM. Pertussis* (*Bordetella pertussis*) Submit isolates
26 to the Minnesota Department of Health, Public Health Laboratory
- 27 NN. Plague (*Yersinia pestis*)
- 28 OO. Poliomyelitis*
- 29 PP. Psittacosis (*Chlamydia psittaci*)
- 30 QQ. Q Fever (*Coxiella burnetii*)
- 31 RR. Rabies (animal and human cases and suspects)*
- 32 SS. Retrovirus infections (other than HIV)
- 33 TT. Reye's Syndrome
- 34 UU. Rheumatic Fever (cases meeting the Jones Criteria
35 only)
- 36 VV. Rubella and Congenital Rubella Syndrome

1 WW. Rocky Mountain Spotted Fever (*Rickettsia*
2 *rickettsii*, *R. canada*)

3 XX. Salmonellosis, including typhoid (*Salmonella* sp.)
4 Submit isolates to the Minnesota Department of Health, Public
5 Health Laboratory

6 YY. Shigellosis (*Shigella* sp.) Submit isolates to the
7 Minnesota Department of Health, Public Health Laboratory

8 ZZ. Streptococcal disease (all invasive disease
9 caused by Groups A and B streptococci and *S. pneumoniae*) Submit
10 isolates to the Minnesota Department of Health, Public Health
11 Laboratory

12 AAA. Syphilis* (*Treponema pallidum*)

13 BBB. Tetanus (*Clostridium tetani*)

14 CCC. Toxic Shock Syndrome Submit isolates to the
15 Minnesota Department of Health, Public Health Laboratory

16 DDD. Toxoplasmosis

17 EEE. Trichinosis (*Trichinella spiralis*)

18 FFF. Tuberculosis (*Mycobacterium tuberculosis* and
19 *Mycobacterium Bovis*) Submit isolates to the Minnesota Department
20 of Health, Public Health Laboratory

21 GGG. Tularemia (*Francisella tularensis*)

22 HHH. Typhus (*Rickettsia species*)

23 III. Yellow Fever

24 JJJ. Yersiniosis (*Yersinia* sp.) Submit isolates to
25 the Minnesota Department of Health, Public Health Laboratory

26 4605.7050 UNUSUAL CASE INCIDENCE.

27 Any pattern of cases, suspected cases, or increased
28 incidence of any illness beyond the expected number of cases in
29 a given period, which may indicate a newly recognized infectious
30 agent, an outbreak, epidemic, or related public health hazard,
31 including suspected or confirmed outbreaks of food or waterborne
32 disease, epidemic viral gastroenteritis, and any disease known
33 or presumed to be transmitted by transfusion of blood or blood
34 products, must be reported immediately by telephone, by the
35 person having knowledge, to the commissioner.

1 Any unexplained death which may be caused by an infectious
2 agent must be reported by the attending physician, medical
3 examiner or coroner, or by the person having knowledge about the
4 death to the commissioner within one day.

5 4605.7060 CASES, SUSPECTED CASES, CARRIERS, AND DEATHS DUE TO
6 DISEASE ACQUIRED OUTSIDE THE STATE.

7 Cases, suspected cases, and deaths due to any infectious
8 disease that a physician determines have been acquired outside
9 the state, and which are considered rare or unusual in
10 Minnesota, or a public health problem in the geographic area of
11 presumed acquisition, must be reported to the commissioner.

12 4605.7075 TUBERCULOSIS; SPECIAL REPORTING.

13 A physician must immediately report to the commissioner of
14 health the name, address, and essential facts of the case if the
15 physician has reason to believe that a person with active
16 pulmonary tuberculosis:

- 17 A. refuses treatment for tuberculosis; or
18 B. has not complied with prescribed therapy for
19 tuberculosis.

20 4605.7080 NEW DISEASES AND SYNDROMES.

21 The commissioner shall, by public notice, request reporting
22 of newly recognized or emerging diseases and describe a
23 specific, planned mechanism for surveillance of the disease or
24 syndrome including the submission of infectious agents isolated
25 from cases to the Minnesota Department of Health, Public Health
26 Laboratory.

27 4605.7090 DISEASE REPORT INFORMATION.

28 Reports that are required in ~~part~~ parts 4605.7030 and
29 4605.7050 shall contain as much of the following information as
30 is known:

- 31 A. disease (whether a case, suspected case, carrier,
32 or death);
33 B. date of first symptoms;
34 C. primary signs and symptoms;

- 1 D. patient:
- 2 (1) name;
- 3 (2) birthdate;
- 4 (3) ethnic or racial origin;
- 5 (4) residence address, city, county, and zip
- 6 code;
- 7 (5) phone number; and
- 8 (6) place of work, school, or child care;
- 9 E. date of report;
- 10 F. physician name, address, and phone number;
- 11 G. name of hospital (if any);
- 12 H. name of person reporting (if not physician);
- 13 I. diagnostic laboratory findings and dates of test;
- 14 J. name and locating information of contacts (if
- 15 any); and
- 16 K. other information pertinent to the case.

17 SEXUALLY TRANSMITTED DISEASE CONTROL

18 4605.7700 SEXUALLY TRANSMITTED DISEASE; SPECIAL REPORTS.

19 The following special reports must be given by physicians

20 to the commissioner:

21 A. Notwithstanding any previous report, physicians

22 who have reason to believe that a person having chlamydia

23 trachomatis, syphilis, gonorrhea, or chancroid has not completed

24 therapy must notify the commissioner immediately of that

25 person's name, address, and other pertinent information.

26 B. Notwithstanding any previous report, physicians

27 who treat persons infected with chlamydia trachomatis, syphilis,

28 gonorrhea, or chancroid must ensure that sexual contacts are

29 treated or provide the names and addresses of sexual contacts

30 who may also be infected to the commissioner. If known, persons

31 named as sexual contacts or needle-sharing contacts to a person

32 with HIV infection must be reported to the commissioner.

33 C. Notwithstanding any previous report, physicians

34 must immediately report to the commissioner the name, address,

35 and essential facts of the case for any person known or

1 suspected of being infected with chlamydia trachomatis,
2 syphilis, gonorrhea, or chancroid who refuses treatment.

3 D. If resources are available, the commissioner may
4 authorize specific outpatient or inpatient facilities to report
5 cases of specific sexually transmitted diseases and clinical
6 syndromes in addition to those specified in part 4605.7040. The
7 diseases and clinical syndromes to be reported shall include
8 urethritis in males, pelvic inflammatory disease, genital herpes
9 simplex infection, ectopic pregnancy, and other sexually
10 transmitted disease as requested by the commissioner.

11 4605.7800 HEALTH EDUCATION.

12 Health care providers working with patients having
13 chlamydia trachomatis, syphilis, gonorrhea, or chancroid must
14 tell the patients how to prevent the spread of the sexually
15 transmitted disease, inform them of the importance of complying
16 with treatment instructions, and of the need to have all
17 relevant sexual contacts promptly treated for the specific
18 sexually transmitted disease.

19 REVISOR INSTRUCTION. The revisor of statutes shall change the
20 reference to "part 7605.7600" contained in part 9555.9960,
21 subpart 1, to "part 7605.7090."

22 REPEALER. Minnesota Rules, parts 4605.7600; 4605.7701;
23 4605.7702; 4605.7703; 4605.7704; 4605.7705; 4605.7706;
24 4605.7707; 4605.7708; 4605.7709; 4605.7710; 4605.7711;
25 4605.7712; 4605.7713; 4605.7714; and 4605.7715, are repealed.